

Express Mail Label No. EV335793989US

7-27-04

3641

24-AT-6045  
PATENT

*[Signature]*



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Fennern

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Art Unit: 3641

:

Serial No.: 09/683,343

:

Examiner: R. Palabrica

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Filed: December 17, 2001

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For: MODULAR REACTOR  
CONTAINMENT SYSTEM

:

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**REQUEST FOR RECONSIDERATION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313

The Office Action dated May 25, 2004 has been carefully reviewed and the following  
remarks are made in consequence thereof.



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Applicant: Fennern :  
Serial No.: 09/683,343 : Art Unit: 3641  
Filed: December 17, 2001 : Examiner: R. Palabrica  
For: MODULAR REACTOR :  
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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL

- Transmitted herewith is:  
Request For Reconsideration (8 pgs.) in response to Office Action dated May 25, 2004  
Transmittal Form (3 pgs.), in duplicate

STATUS

- Applicant  
☐ claims small entity status.  
☒ is other than a small entity.

CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER FOR PATENTS

Express Mail No. EV335793989US

Date: July 26, 2004

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Michael Tersillo, Reg. No. 42,180

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 420.00	\$ 210.00
<input type="checkbox"/> third month	\$ 950.00	\$ 475.00
<input type="checkbox"/> fourth month	\$1,480.00	\$ 740.00
<input type="checkbox"/> fifth month	\$2,010.00	\$1,005.00
	Fee Due	\$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

**OR**

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS		=	x \$43 = \$		x \$86 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145 = \$		+ \$290 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

OR

(b) ☐ Total additional fee for claims required \$

### FEE PAYMENT

5. Attached is a check in the sum of \$

☐ Charge Deposit Account No. 01-2384 the sum of \$  
A duplicate of this transmittal is attached.

### FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:



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